

**Recipient of the
Workforce Development
Innovation Fund 2015/16**



learn
from others

Suffolk County Council and Sue Ryder

Community Learning Hubs

Sue Ryder was running a network of cafes in towns across the county, providing a combination of peer support, information and activities for people with dementia, and their families and carers. A partnership including local councils, Clinical Commissioning Groups and Sue Ryder had a plan to develop the nine existing cafes into Community Learning Hubs – to extend their reach to supporting older people with health conditions other than, or in addition to, dementia.

Around 77,000 people in Suffolk are carers. Of these, some 26,000 provide more than 20 hours of unpaid care every week. In Suffolk, 25 per cent of the population is over the age of 65, compared to 18 per cent nationally.

The idea for the dementia café model originated in the Netherlands, to create a safe and comfortable space where people could attend free of charge, be social, and come and go as they pleased.

Sue Ryder established the first café in 2011, working closely with The Alzheimer's Society. The aim was to increase knowledge to self-manage care, confidence to cope better, to increase well-being, reduce isolation and increase participation in meaningful activities, helping people to make informed decisions and feel in control. An evaluation of café users in early 2015 showed 64 per cent felt less need to contact healthcare professionals as a result.

A partnership including Suffolk County Council, West and East Suffolk Clinical Commissioning Groups (CCGs), Norfolk and Suffolk Dementia Alliance, Health Education East, Suffolk Family

Carers and Sue Ryder had a plan to develop the nine existing cafés into Community Learning Hubs – to extend their reach to supporting older people with health conditions other than, or in addition to, dementia.

What we wanted to achieve

The aims of the project were to:

- Build the skills and confidence of unpaid and family carers through the facilitation of peer support networks and delivery of bespoke learning, for example on assistive technology, caring with confidence, and condition-specific awareness.
- Improve people's well-being through social interaction, reducing the need for other services.
- Build community capacity both by drawing on the assets of carers and people who need support, and by recruiting and supporting community volunteers
- Promote integration across adult social care, primary and community health and the voluntary sector through joint planning and delivery of the Community Learning Hub offer.

What we did

With Sue Ryder already running nine cafés across Suffolk, we established two more, and opened all eleven cafés at least once a fortnight.

The two new cafés were created to link into two pilot health and social care integration projects based in those locations. The existing cafés were run with the invaluable support from volunteers.

The atmosphere at all the cafes is wonderful and it is obvious that the people who attend really value the groups, and the friendships they have made and the support they gain from attending. The staff and volunteers are all brilliant and look after the attendees so well. The staff are also very knowledgeable on the other services available throughout the county which may benefit the attendees.

Vanessa Lomax, Team Leader Ipswich, Age UK Suffolk

To promote the opportunity and elicit more support, we developed a community and engagement strategy, and action plan. This included more specific roles for volunteers with shorter time commitments.

We developed a programme for learning which included the following sessions:

- Living Well – physical and mental health, for example exercise and nutrition
- Practical support and staying safe – how to maintain health and independence, and plan for emergencies
- Carers support and advice – including peer support groups, self-care, and therapies
- Financial and legal – support and advice
- Other support and talks – including care provision, signposting sessions, entertainment speakers and art and music therapy.

The sessions were delivered by our own highly-trained facilitators are knowledgeable in providing a 'listening ear' and signposting to local services, and by a range of experts from

charities, voluntary services and professional organisations, including Age UK, Alzheimer's Society, Suffolk Family Carers, Healthwatch Suffolk, Meals on Wheels Service, Suffolk Community Transport, British Red Cross, Police, local solicitors, etc.

The two Clinical Commissioning Groups (CCGs) promoted the programme via newsletters and emails to a variety of community, health, social care, and voluntary organisations across the county. Sue Ryder facilitators promoted the service at a local level through leaflet drops and talks with community services.

We distributed posters advertising the Living Well sessions in places such as health centres, GP surgeries, opticians, leisure centres, and supermarkets, as well as online. We created custom programmes and adverts for each of the Community Learning Hubs so people could prepare and organise themselves to attend.

Café facilitators spend a great deal of time talking with members, offering 1:1 support. Topics discussed included: family, anxiety, depression, suicide, bereavement, travel, medication, sundowning, benefits, home care, respite, challenging behaviour, changes to behaviour, guilt, urinary tract infections and eating habits.

From July to December 2015 we delivered 246 sessions to 3219 people. This included delivering 81 Living Well sessions to 901 people.

What we achieved

We conducted a survey of café users in January 2016 and used the data to evaluate the project.

Our report showed there was considerable positive impact on the carers and the people who need their care and support; the café visit and Living Well sessions were the highlight of people's weeks, and the learning provided was highly valued.

Overall there were considerable health benefits for the carer including lowered stress, reduction in feelings of depression and helplessness, improved sleep and improved diet. There were also health benefits for the people who need

care and support, including improved fitness and walking, a reduction in falls and improved diet. For all there was a reduction in social isolation and an increase in confidence as a result of attending the cafés and Living Well sessions.

The key findings from our evaluation were:

- More than 80 per cent of Synergy Café members were assessed as having moderate or severe dementia, suggesting that participants would need to draw more heavily on other, most likely statutory, services if Synergy Cafes were not available.
- The most cost-effective interventions, as outlined in the literature review, appear to be those which focus on the caregiving duos of the person with dementia and their main carer, rather than just on the person with dementia. The Synergy Cafes provide a multi-component approach and costs on average £21.14 per attendance, inclusive of staffing and equipment costs. This is compared with NHS talking therapy referrals such as IAPT, £105, GP diagnosis of dementia, £55 or mindfulness-based cognitive therapy £51-£86.
- A scale used to measure subjective wellbeing at the beginning and end of a four week audit period, carried out as part of the evaluation, demonstrated that participants experienced a highly statistically significant improvement in their wellbeing during the time they spent at the cafés.
- The qualitative analysis conducted as part of this evaluation shows that the Synergy Cafés were perceived as vital to the wellbeing of both members living with dementia and their carers, who perceive that there are very few alternatives available to meet their needs. Two main themes emerged from the qualitative evidence, suggesting both ‘health’ and ‘enablement’ benefits for participants.
- The report concluded that the Synergy Cafes offered excellent value for money.

What we learnt

A key challenge was encouraging people without dementia to come along to the Living Well sessions - because they were perceived as being a dementia service.

We learned there was still a stigma around dementia, and that this needed to be addressed through further engagement work with local communities, and through the work of the emerging dementia action alliances.

We learned the importance of professional facilitation and organisation for these groups. Cafés which withdrew support thinking they could self-sustain, found the positive impact was much reduced.

We would recommend this project model to others, however they would need to secure funding. For it to be successful, it is necessary to tailor the sessions for the particular client group attending, as the education sessions provided in the Synergy Cafés were specifically for those living with dementia and their carers. In order to evaluate the success of your project it is vital to start collecting relevant data as early as possible.



My depression has lifted, I sleep better and I eat better, the food here is great. I get to talk with other people in a similar situation and I can see my partner getting pleasure out of coming here. He doesn't get as angry, he is certainly more patient and we laugh together again.

Carer



**This project addressed the 2015/16 priority on:
Proposals which test a response to other significant and demonstrable policy drivers within the adult social care sector.**

For more information please contact:

Project lead: Jo Marshal, Neurological Centre Director, Sue Ryder
jo.marshall@suerydercare.org

Fiona Denny, ACS & CYP Workforce Development Team,
Suffolk County Council
fiona.denny@suffolk.gov.uk

Skills for Care recommends

Skills for Care produces a wide range of products and services related to those helping to deliver dementia care.

Common Core Principles dementia care

This explains how to care for and improve the experience for people living with dementia.

www.skillsforcare.org.uk/dementia

Better domiciliary care for people with dementia

This is aimed at leaders and managers working in these services.

www.skillsforcare.org.uk/dementia

Training for Dementia workers

Skills for Care promotes free e-learning and various other guidance and advice to help employers to develop the skills of their staff.

www.skillsforcare.org.uk/dementia

Skills for Care
West Gate
6 Grace Street
Leeds
LS1 2RP
telephone 0113 245 1716
email info@skillsforcare.org.uk
web www.skillsforcare.org.uk

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